


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2007 08:00 AM
Secretary of State

DOCUMENT # P05000131976	
1. Entity Name ATLANTIC CONSTRUCTION OF BREVARD INC.	

Principal Place of Business 405 CHURCH ST W MELBOURNE FL 32904	Mailing Address 405 CHURCH ST W MELBOURNE FL 32904
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E034 (10/06)

6. Name and Address of Current Registered Agent JEFFRIES, JAMES E 405 CHURCH ST W MELBOURNE FL 32904	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL	Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent	
SIGNATURE <i>James E. Jeffries</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <i>2/2/07</i> <small>(NOTE: Registered Agent signature required when reappointing)</small>

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
D JEFFRIES, JAMES E 405 CHURCH ST W MELBOURNE FL 32904	
D GREGORY, DANNY 13365 105TH ST FELLSMERE FL 32948	
D GRUBER, BRETT 314 COMET AVE SE PALM BAY FL 32909	
D YOUNG, JAMES 405 CHURCH STREET W. MELBOURNE FL 32904	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
U00000626374 02/15/07-80018-001 150.00	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: <i>James E. Jeffries</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE: <i>2/2/07</i> <small>Date</small>	PHONE: <i>321-508-3849</i> <small>Daytime Phone #</small>
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